PTO/SB/17 (10-06)
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Fees pursuant to the	Effective on 12/08/ Consolidated Approp	1004. riations Act, 2005 (H.R.	4818).	Application Nurr		D/775,767-C		
FEE TRANSMITTAL			Filing Date		February 10, 2004			
				First Named Inv	entor A	Andrew H. Fischer		
For FY 2009				Examiner Name				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1797				
TOTAL AMOUNT OF PAYMENT (\$) 1,810.00				Attorney Docket No. U0120.70019US00				
METHOD OF P	AYMENT (check	all that anniv)						
	- F	7	7,,,					
Check x Credit Card Money Order None Other (please identify): Deposit Account Deposit Account None: 23/2825 Deposit Account None: Wolf, Greenfield & Sacks, P.C.								
	runt Deposit Account		2825_					cks, P.C.
For the ab	ove-identified dep	sit account, the Di	rector is					
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
	rge any additional : s) under 37 CFR 1	ee(s) or underpayr 16 and 1.17	nents o	x Credit	any overpay	yments		
FEE CALCULA	TION							
1. BASIC FILING,		XAMINATION FEE						
	FI	LING FEES Small Entity	SE	ARCH FEES Small Entity	EXAMINA	ATION FEES Small Entity	5	
Application Typ	e Fee (S		Fee (\$		Fee (\$)	Fee (\$)	Fees	Paid (\$)
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIR	M FEES							Small Entity
Fee Description Fee (\$)								
Each claim over 2				52 220	26 110			
Each independent claim over 3 (including Reissues) Multiple dependent claims							390	195
	no Bold (6)	M	Hinla Donan					
Total Claims Extra Claims Fee (\$) F				ee Paid (\$) Muttiple Dependent Claims Fee (\$) Fee Paid (\$)				
HP = highest number of total claims paid for, if greater than 20.								24
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)							_	
	or HP =	x =						
HP = highest numbe	er of independent claim	paid for, if greater than	13.					
3. APPLICATION								
If the specificati	on and drawings e	xceed 100 sheets of the application size	fpaper	(excluding elect	ronically file	ed sequence of	r computer	.0
		tne application siz				inty) for each	additional 2	i v
Total Sheets	Extra Shee			dd tional 50 or fra		Fee (\$)	Fee	Paid (\$)
	- 100 =			(round up to a wh				
4. OTHER FEE(S)						Fees	Paid (\$)
Non-English S	Specification, \$13	0 fee (no small ent	ity disc	ount)				
Other (e.g., lat	te filing surcharge)	1501 Utility Iss	ue fee					510.00
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SUBMITTED BY								
Signature				Registration No. (Attorney/Agent)	52,078	Telephone	617.64	6.8000
Name (Print/Type) Walt Norfleet						Date	April 2	3, 2009

Certificate of Electronic Filing Under 37 CFR 1.8						
I hereby certify that this paper (along with any paper ref	erred to as being attached or enclosed) is being transmitted via the Office electronic filing					
system in accordance with § 1.6(a)(4).	King A Dugano					
Dated: April 27 2009	Signature: BUDL PUDDUO (Lies R. Puopolo)					
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